

Attachment/Appendix
PAST PERFORMANCE INFORMATION QUESTIONNAIRE
Control Number (02PPE1932)- SEGMENT 2

If this form is used and more room is required, you may use the space at the bottom of the second page or continue on a separate sheet.

1. REFERENCED CONTRACT NUMBER _____ Award Date _____ with
(contractor name's and CAGE)

2. Contracting Activity: (Government or Commercial)
(Address) _____

3. Contract Dollar Value: \$00.00

4. Points of Contact:

a. Procuring Contracting Officer
(name) _____
(email) _____
(phone) _____
(FAX) _____

b. Current Admin Contracting Officer
(name) _____
(email) _____
(phone) _____
(FAX) _____

c. Gov't Quality Assurance Rep (QAR)
(name) _____
(email) _____
(phone) _____
(FAX) _____

d. Industrial Specialist
(name) _____
(email) _____
(phone) _____
(FAX) _____

e. Other (Private Firm, Company President or other POC)
(name) _____
(email) _____
(phone) _____
(FAX) _____

5. Description of Item:

a. Item: _____

b. Part Number: _____

c. NSN: _____

6. The following is the contractor's description of the work performed under this contract.

Please comment on the accuracy of the information and detail any disagreements.

Contract Number and description of work performed: The offeror should place the referenced contract here and the type of work performed and relevancy.

7. Was the contract terminated or cancelled (in whole or part)? YES or NO
If yes, why?

8. Were there any instances where quality or schedule requirements were not met? If so, please explain. If not, please state "none".

9. Were there any problems concerning the contractor's adherence to contract delivery schedules? If not, please state "none".

Delivery Data:

a. Original Delivery Schedule: Start Date: End Date:
b. Revised Delivery Schedule: Start Date: End Date:
(i) State reason for revision of schedule:

c. Contract Delivery Status: Please check proper description

☐ On Time ☐ Delinquent ☐ Product Delivered and Paper
Delay ☐ Government Caused ☐ Contractor Caused ☐ Other/Explain

d. Contract Delivery Delinquency Age Status: Please check proper description

☐ 15-30 Days Delinquent ☐ 31-60 Days Delinquent
☐ 61-90 Days Delinquent ☐ Over 90 Days Delinquent

10. Were there any problems encountered in the performance of the contract, conforming to specifications and standards of quality and good workmanship that

negatively impacted the customer? If so, please describe. In addition, list the Quality Deficiency Report (QDR) number (if applicable) and describe the deficiency, include a description of corrective actions implemented as a result of the problem encountered.

11. Overall, were there any deficiencies, weakness, or strengths concerning the contractor's history of reasonable and cooperative behavior, commitment to customer satisfaction; and generally, the contractor's business-like concern for the interest of the customer?

12. Concerning administration aspects, are you aware of any or did you experience any delays as a result of the offer's Subcontractor's or Vendors? If so explain.
